

California Resident Income Tax Return 2006**540** C1 Side 1

Fiscal year filers only: Enter month of year end: month _____ year 2007.

Your first name		Initial	Last name		Your SSN or ITIN		P AC A R RP
If joint return, spouse's first name		Initial	Last name		Spouse's SSN or ITIN		
Present home address — number and street, PO Box, rural route, or PMB no.					Apt. no.	PBA Code	
City, town, or post office (If you have a foreign address, (see page 13))					State	ZIP Code	
Prior Name	If you filed your 2005 tax return under a different last name, write the last name only from the 2005 return. ● Taxpayer _____ ● Spouse _____						

Filing Status	1 <input type="radio"/> Single	4 <input type="radio"/> Head of household (with qualifying person). (see page 3)
	2 <input type="radio"/> Married filing jointly. (see page 3)	5 <input type="radio"/> Qualifying widow(er) with dependent child. Enter year spouse died _____.
	3 <input type="radio"/> Married filing separately. Enter spouse's SSN or ITIN above and full name here _____	

6 If someone can claim you (or your spouse) as a dependent, fill in the circle here (see page 7) ● 6 ☐

► For line 7, line 8, line 9, and line 10: Multiply the amount you enter in the box by the pre-printed dollar amount for that line.

7 **Personal:** If you filled in 1, 3, or 4 above, enter 1 in the box. If you filled in 2 or 5, enter 2.

If you filled in the circle on line 6 do not enter amount on line 7 7 ☐ X \$91 = \$ _____

8 **Blind:** If you (or your spouse) are visually impaired, enter 1; if both, enter 2 8 ☐ X \$91 = \$ _____

9 **Senior:** If you (or your spouse) are 65 or older, enter 1; if both, enter 2 ● 9 ☐ X \$91 = \$ _____

10 **Dependents:** Enter name and relationship. **Do not include yourself or your spouse.** _____

_____ Total dependent exemptions. ● 10 ☐ X \$285 = \$ _____

11 **Exemption amount:** Add line 7 through line 10. Transfer this amount to line 21 11 \$ _____

12 State wages from your Form(s) W-2, box 16 or CA Sch. W-2, line C ● 12 _____

13 Enter federal adjusted gross income from Forms 1040, line 37; 1040A, line 21; 1040EZ, line 4 13 _____

14 California adjustments — subtractions. Enter the amount from Schedule CA (540), line 37, column B ● 14 _____

15 Subtract line 14 from line 13. If less than zero, enter the result in parentheses (see page 13) 15 _____

16 California adjustments — additions. Enter the amount from Schedule CA (540), line 37, column C ● 16 _____

17 California adjusted gross income. Combine line 15 and line 16 ● 17 _____

18 Enter the **larger of:** {
 Your California **itemized deductions** from Schedule CA (540), line 44; **OR**
 Your California **standard deduction** shown below for your filing status:
 • Single or Married filing separately \$3,410
 • Married filing jointly, Head of household, or Qualifying widow(er) \$6,820
 If the circle on line 6 is filled in, STOP. (see page 13) ● 18 _____

19 Subtract line 18 from line 17. This is your **taxable income**. If less than zero, enter -0- 19 _____

20 Tax. Fill in the circle if from: ☐ Tax Table ☐ Tax Rate Schedule ☐ FTB 3800 ☐ FTB 3803 ● 20 _____

21 Exemption credits. Enter the amount from line 11. If your federal AGI is more than \$150,743, see page 14. 21 _____

22 Subtract line 21 from line 20. If less than zero, enter -0- 22 _____

23 Tax (see page 14). Fill in the circle if from: ☐ Schedule G-1 ☐ FTB 5870A ● 23 _____

24 Add line 22 and line 23. 24 _____

25 Enter credit name _____ code no _____ and amount ► 25 _____

26 Enter credit name _____ code no _____ and amount ► 26 _____

27 To claim more than two credits (see page 15) ● 27 _____

28 Nonrefundable renter's credit (see page 15) ● 28 _____

29 Add line 25 through line 28. These are your total credits 29 _____

30 Subtract line 29 from line 24. If less than zero, enter -0- 30 _____

31 Alternative minimum tax. Attach Schedule P (540) ● 31 _____

32 Mental Health Services Tax (see page 16) ● 32 _____

33 Other taxes and credit recapture (see page 16) ● 33 _____

34 Add line 30, line 31, line 32, and line 33. This is your total tax ● 34 _____

